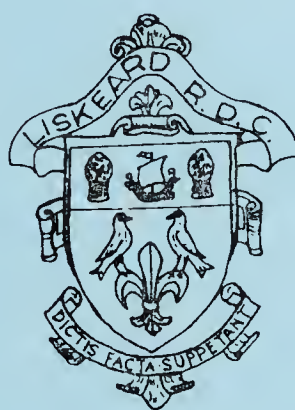


**LISKEARD  
RURAL DISTRICT COUNCIL**



**The  
ANNUAL REPORT  
of the  
Medical Officer of Health  
for the year 1964**

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**P. J. FOX, M.B., B.Ch., B.A.O., D.P.H.**

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**RURAL DISTRICT OF LISKEARD**

**THE ANNUAL REPORT**

**of the MEDICAL OFFICER OF HEALTH**

**for the Year 1964.**

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**To the Chairman and Members of the Rural District Council of Liskeard.**  
Mr. Chairman, Ladies and Gentlemen,

As has been the case for many years, changes in the population of No. 7 Health Area were relatively small and insignificant in 1964. Small reductions in St. Germans R.D. and Liskeard M.B. were offset by small increases in the other four County Districts, resulting in an overall increase in the Health Area population from 50,340 in 1963 to 50,820 in 1964.

The corrected birth rate showed a further increase to 18.8 per 1,000, population which again brought it above the national rate. Still births at 11 were identical with last year's figure, and the rate here was below the national rate. Deaths at 674 were below the 1963 figure, but the corrected rate per 1,000 of the population was slightly above the rate for England and Wales. The excess of live births over deaths was 90. For the third successive year there were no maternal deaths. The figure for deaths of infants under one year of age was up on the 1963 figure, but the rate per 1,000 live births was still fractionally below the national rate. Of the 15 infants who died, 7 failed to survive the first critical week of life and a further 3 lived less than four weeks.

In 1962 I commented briefly on the rate of illegitimate births in the Health Area which in that year represented 5.6 per cent of all live births, and had not increased noticeably above the average for the previous 13 years. In 1963 the rate fell slightly to 5.4 per cent but in 1964 there was a sharp increase to 8.1 per cent. The 62 illegitimate births registered meant that one child in every twelve born started life with this social handicap.

Of the 674 deaths registered in 1964 heart disease was responsible for 271, strokes caused 120, and 111 were caused by cancer. Of the defined forms of heart disease that form affecting the coronary arteries of the heart itself caused 123 deaths. Amongst the defined forms of cancer that affecting the lung and windpipe was most prevalent causing 16 deaths. Cancer of the stomach was almost as prevalent and caused 15 deaths. There was a sharp reduction in the mortality from breast cancer which in 1964 caused only 6 deaths. Of those who died during 1964 some 49 per cent had reached or exceeded the age of 75 years at the time of death, whilst a further 27 per cent were between 65 and 74 years of age at the time of death.

The incidence of notifiable disease (other than tuberculosis) was very light during the year when 139 cases only were notified. The most prevalent of this group of diseases was measles, of which there were 84 cases occurring mainly in the St. Germans and Liskeard Rural Districts. Of the more serious forms of notifiable diseases there were two cases of meningitis and one of meningococcal infection, but none of these had a fatal outcome or serious after-effects.

Although the incidence of notifiable diseases other than measles has tended to decline in recent years there has been an increase in minor forms of illness which are almost certainly infectious in character. Of these one of the more prevalent, and troublesome, is a type of epidemic vomiting and diarrhoea. This appears to involve mainly children in the lower school age group i.e. between the ages of 5 and 8 years, but older children and



adults are by no means immune. The cause is not known but is believed to be a virus. The infecting agent may spread through the material vomited, the stools, or from the mouth, nose, and throat in much the same way as the common cold. Whilst personal hygiene is helpful in limiting the spread of infection the fact that much of the dissemination of the infecting agent is from the upper respiratory tract makes really satisfactory control virtually impossible. Happily the disease is of short duration, and not usually severe particularly in children and it represents more of a nuisance than any real danger to health. In some older children and in adults the attacks tend to be more severe. In addition to this type of epidemic illness affecting the gastro-intestinal system one also hears of, and sees a fair amount, of vague influenza-like illness, some of which may, of course, be true influenza virus infection, but much is probably due to a variety of other viruses which have been discovered in the last decade. It is fortunate that most of these infections are of a mild nature since most of the drugs currently available for treating them are not very effective. Another difficulty in dealing with these infections is the comparative lack of facilities for isolating and identifying the agent responsible. The techniques and equipment for working in the laboratory with viruses are still being developed and evolving are not currently available to any extent outside the larger laboratories and research centres. They will, of course, eventually be made available more widely, but until this is the case much of our opinions must continue in the realm of speculation.

If one looks at a graph or diagram charting the incidence in this Health Area of newly notified cases of tuberculosis over the past 17 years there is no doubt that a gradual fall in incidence is clearly in evidence. This overall reduction is not however in the nature of a smooth, and continuous downward gradient but shows more of a spiky hill and dale outline. Thus a year of very low incidence is frequently followed by a year or two of rising incidence followed in turn by a further fall in incidence. In 1963 the rate fell to a new low level of 0.22 per 1,000 of population, to be followed in 1964 by a noticeable rise to 0.37 per 1,000 of population. Of the 19 new cases coming to light during 1964, no less than 13 were in people aged 45 years or more. This serves to reinforce the current belief that the main reservoir of tuberculous infection is probably in the middle-aged and elderly section of the community, and especially in males in these age groups. In such cases it is not infrequently associated with and possibly masked by the "English disease"—chronic bronchitis. Difficulties of diagnosis are aggravated by lack of interest if not overt resistance to the diagnostic facilities made available by the Mass Radiography Service on the part of people, and more particularly males, in the older age groups. Relatively low rates of tuberculin sensitivity amongst 12-year-old school-children were again found in 1964 when the rate was 5.1 per cent of 507 children who had the test applied and subsequently read. This indicates that the majority of children up to this age are escaping contact with tuberculous infection, and suggests that there is some reduction in the size and extent of the pool of unknown tuberculous infection. In this connection it is interesting to note that as recently as 1954 children only slightly older were showing a positive reactor rate of 14.3 per cent.

There were three deaths attributed to tuberculosis during the year. Of these two were chronic sufferers whose disease had not responded to a variety of treatments. The other of a 65-year-old woman, was only discovered as a result of an autopsy carried out.

The welfare of elderly people, especially those living alone, and those living in old houses and cottages lacking amenities, continued to pose problems and cause anxiety. In a great many instances the Home Help Service did valuable work in enabling old people to continue to live at home. This arrangement is not only humane, but imposes much less of a financial burden on the general body of ratepayers and taxpayers. There are however limitations to the extent and type of home help which can be provided to allow old persons to continue to live at home, and in such cases,



and there are many of this type, the only satisfactory solution is admission to a County Council home for old people. In spite of extra provision which has been made in recent years the demand for places in such homes still outstrips the supply with the result that waiting lists, and some system of priorities in selecting people for admission are inevitable. At present the County Council provides some 145 welfare places in homes in this Health Area. Of these 74 are in Lamellion Hospital, Liskeard, 35 at Polvellan House, Looe, and 36 at St. Anne's, Saltash. The County Council is under an obligation to the Hospital Management Committee to vacate the accommodation now in use at Lamellion Hospital, Liskeard, and to replace the 74 places now available there, and provide some additional places it is proposed to provide two 48-place homes—one at Liskeard and one at Callington. This new provision is scheduled for the financial year 1966/67, and the provisional capital cost of each home was estimated in 1964 at £82,000 or £1,700 per place provided. Whilst all concerned with the welfare of old persons would wish to see more generous provision of places in homes it is an inescapable fact that such provision represents a heavy financial burden on the community. If these difficulties are appreciated and seen against the larger picture of demands for better educational facilities, more and better hospital accommodation, increases in housing provision, more direction of resources into the solution of traffic congestion, then those concerned, and their relatives, may be more tolerant of some delay in solving the problem of caring for old persons.

Recent outbreaks of enteric fever in this country have caused much concern and have underlined the need for higher standards of food hygiene. In this field the most important and usually the most faulty element is the human food handler. It is true that mal-functioning, badly maintained equipment can harbour and spread food poisoning infection. In the majority of outbreaks of illness contracted from food the principal culprit is the food-handler whose standards of personal cleanliness are either indifferent or downright bad. The Food Hygiene Regulations require the provision of adequate washing facilities but no regulation nor any amount of normal reasonable supervision can ensure that a careless employee makes use of such facilities. So often the human links in the chain to prevent infection of food are the weak ones which fail, and set at nought or seriously reduce the value of good premises and equipment. In saying this I would not wish the inference to be drawn that there are no deficiencies in the surroundings and equipment associated with the storage, display and handling of food. The most striking deficiency in the majority of establishments dealing with food is the absence or inadequacy of cold storage and cold display facilities. Refrigerated display counters for foods such as cooked meats, meat pies and other items of food which are consumed without further cooking are still conspicuous by their absence, even in large stores where large amounts of such foods are stocked and sold. Too often one sees such items displayed in windows or on open counters where they are subject not only to infecting agents present in the air, and dust which surrounds them, but also to the higher ambient temperature which favours the growth and rapid multiplication of harmful bacteria and moulds. I feel that in shops handling these foods, and indeed for those selling confectionery, and that noted West of England delicacy—clotted cream—such provision is to be regarded as something which a good well-run food store should not be without.

There has not been a great deal of activity in the field of local authority housing, nor have any large scale slum clearance schemes come forward during 1964. The heaviest demand for Council house tenancies is found in the urban districts, notably at Saltash and Torpoint, where sizeable waiting lists are the rule, the position being rather easier in rural areas. Further provisions of houses specially designed to suit the needs of elderly persons has been made, and there appears to be no difficulty in finding tenants for such dwellings when they are completed. Many older dwellings have been saved from closing or demolition by the operation of improvement grant schemes. Provided such houses are structurally sound, reason-



ably free from dampness, and have some space around them, they can be made into attractive and comfortable homes by the expenditure of a fraction of what would be required to provide the equivalent in living accommodation and amenities in a newly-built house. The extension of main water supplies, and sewerage and sewage disposal schemes into rural localities has done a great deal to encourage owners of older properties to take advantage of improvement grant schemes.

The piped water supplied by the East Cornwall Water Board has been of satisfactory quality, and has been generally adequate in quantity throughout the year. Local difficulties did occur from time to time due almost entirely to old and/or inadequate distribution mains. The Board is working to a programme for the renewal of such inadequate distribution arrangements, but this will have to be spread over a period of some years, and until it is completed wholly satisfactory supplies will not be possible in certain localities. Over and above the local difficulties the total amount of water available from the two main sources at Trekeive Steps and at Bastreet is only just sufficient to meet present demands, and I am glad to know that the Board has been given authority to proceed with a scheme to impound and store a large amount of water by means of a dam to be constructed in a moorland valley at Siblyback, to the north of Liskeard.

By the end of the year permission—so long awaited—had been given for a start to be made on the scheme for sewage disposal in the Borough of Liskeard. This, when completed, will remove a major source of pollution of what is otherwise a pleasant inland river. Further schemes are in hand or have been completed in the Liskeard and St. Germans Rural Districts, and in the Liskeard Rural District the position has now been reached where relatively small communities in hamlets are being provided with proper means of sewage disposal—a far cry from the primitive and thoroughly unsatisfactory state of sanitation which existed as recently as 10 - 12 years ago. At the principal holiday resort in this Area—Looe—the unsatisfactory and objectionable method of discharging crude sewage into the river continues, and at the time of writing I am not aware of definite proposals to remedy this unpleasant state of affairs. As long ago as 1949, soon after my appointment as Medical Officer of Health, I wrote my first adverse comment on the arrangements, or rather the lack of them, for sewage disposal at Looe. In each succeeding annual report over the past 15 years I have repeated this critical comment and am sorry to have to again do so in 1964. By contrast with other parts of the Health Area where progress in providing modern methods of sewage disposal has been proceeding steadily, the position at Looe is becoming yearly more difficult to defend and justify.

The disposal of household and trade refuse presents a problem which continues to grow from year to year. Allied to an increase in the volume of refuse is the difficulty in finding suitable sites for disposing of it. Moreover the present generation is apt to take a more critical view of disposal methods and the day to day management of refuse tips. I do not quarrel with this attitude since a badly-sited and inefficiently-managed tip can without doubt be a source of considerable nuisance to those living and working in the vicinity of the tip. If, however, these higher standards are to be achieved and maintained, members of the District Councils and ratepayers will have to come around to the realisation that more money will have to be spent on this service, and I am glad to see that most Councils when faced with this problem have accepted the necessity for this.

In concluding this general preface I should like to thank the Members and the Officers of all six District Councils in the No. 7 Health Area for the understanding and help they have given me through the year.

I have the honour to be,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

P. J. FOX,

Medical Officer of Health.

## RURAL DISTRICT OF LISKEARD

### Public Health Committee

Councillor **J. W. J. Pearse**, Chairman  
Councillor **W. L. Daniel**, Vice-Chairman

### Housing Committee

Councillor **J. Olliver**, Chairman  
Councillor **D. L. Richards**, Vice-Chairman

### Health Officers of the Authority

**Dr. P. J. Fox, M.B., B.Ch., D.P.H.**, Medical Officer of Health  
Health Area Office, West Street, Liskeard. Telephone Liskeard 3373

**Mr. G. Rogers, F.R.S.H., F.A.P.H.I.**  
Chief Public Health Inspector and Surveyor

**Mr. G. M. Lawry, M.A.P.H.I., A.I.H.M., Mun.B.I.**  
Deputy Public Health and Building Inspector

**Mr. G. O. Cowling**, Assistant Surveyor  
Council Offices, Luxstowe House, Liskeard. Telephone Liskeard 2379

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Area of Rural District	104,803 acres
Population (Registrar-General's Estimate)	13,430
Number of Inhabited Houses	4,876
Rateable Value	£264,031
Product of Penny Rate	£1,027-18-7d.

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### VITAL STATISTICS FOR 1964

		Male	Female	Total
Live Births		114	93	207
	Liskeard R.D.	Health Area No. 7	England & Wales	
Birth Rate per 1,000 of population	18.5	18.8	18.4	
		Male	Female	Total
Still births		2	—	2
	Liskeard R.D.	Health Area No. 7	England & Wales	
Still birth rate per 1,000 total births	9.6	14.2	16.3	
		Male	Female	Total
Deaths		108	78	186
	Liskeard R.D.	Health Area No. 7	England & Wales	
Death rate per 1,000 of population	11.9	11.7	11.3	
		Male	Female	Total
Deaths of infants under one year of age		6	2	8
	Liskeard R.D.	Health Area No. 7	England & Wales	
Infant mortality rate per 1,000 live births	38.6	19.6	20.0	

### Principal Causes of Death at All Ages

Heart Disease	89
Stroke	26
Cancer (all sites)	24
Respiratory Disease	10
Circulatory disease	6
Accidents	4
Suicide	4



The infant mortality rate is rather above the level one would wish to see it, but no single specific reason for this increase can be found. Of the 8 infants who died, 5 did not survive beyond the first week of life.

Coronary artery disease was responsible for 33 of the 89 deaths attributed to heart disease. Of the defined forms of cancer those affecting the lung and the stomach, though most numerous, were not unduly prevalent. All forms of cancer were responsible for 13 per cent of the total deaths as against 18 per cent for the country as a whole. Of those who died during the year 42 per cent had reached or exceeded the age of 75 years at the time of death.

### Infectious Diseases.

The incidence of these diseases was relatively light during 1964 when 41 cases only were notified. Of these, one case of meningitis and one of meningococcal infection were the only two more serious forms of infection, but neither had a serious outcome. No deaths from infectious disease were registered during 1964.

The following are details of cases and case rates during 1964 :—

Disease	Cases	Rate per 1,000 of population	
		Liskeard R.D.	Health Area No. 7
Measles	25	1.86	1.65
Pneumonia	7	0.52	0.47
Rheumatic Fever	2	0.15	0.04
Scarlet Fever	1	0.07	0.08
Erysipelas	1	0.07	0.12
Meningitis	1	0.07	0.04
Meningococcal infection	1	0.07	0.02
		Rate per 1,000 total births	
Peurperal pyrexia	2	9.57	5.16
		Rate per 1,000 live births	
Ophthalmia neonatorum	1	4.83	1.31

### Tuberculosis.

During the year 4 new cases of tuberculosis were notified—an increase of 2 on the previous year. All four cases were respiratory infections, and all were in males aged between 45 and 64 years. There were no deaths from tuberculosis during the year.

The following are details of new cases and case rates ;—

Age Group	M	F
0—4	—	—
5—14	—	—
15—24	—	—
25—44	—	—
45—64	4	—
65 and over	—	—
	4	—
Rate per 1,000 of population		
Liskeard R.D. Health Area No. 7		
New cases	0.30	0.37
All known cases	3.20	3.90
Deaths	—	0.06

### National Assistance Act, 1948.

No action under Section 47 of this Act was required during 1964.



### **Food and Drugs Act, 1955.**

Generally speaking reasonable standards were achieved and maintained in premises handling food. During the summer months the rapid expansion of food handling and catering activities in small and not particularly well-equipped premises is always a source of anxiety. The employment of staff to meet this seasonal demand means that many temporary employees with no real interest in the trade, and no training in food hygiene, are found at a time and in circumstances when, if anything, more care and better standards in handling food are called for. I cannot think of any way out of this difficulty and fortunately it has not over the years led to any outbreaks of illness associated with food.

The preference of the public for a softer type of ice-cream which has to be sold loose from bulk containers is, from the point of view of food hygiene, a retrograde step. The constant exposure of this soft ice-cream in its container to the atmosphere during the time it is being dispensed, coupled with a build-up of contamination on servers used to dispense it, must lead to a reduction in the standard of purity of this popular item of food. This is clearly shown by the appearance of an increasing number of Grade III and IV results in samples of this type of ice-cream when submitted to laboratory tests.

In spite of the situation which exists here for 3 - 4 months each summer—difficult and potentially hazardous—no case of food poisoning was notified during 1964.

### **Water Supply.**

Piped supplies of wholesome water from the mains of the East Cornwall Water Board are available to almost the whole population of the Rural District, and very few problems and certainly none of any real size now exist in this sphere.

### **Sewerage and Sewage Disposal.**

The Councils' progressive and energetic policy of bringing modern methods of sewage disposal to villages and hamlets throughout the Rural District was actively pursued throughout the year and the point is now being reached when comparatively small communities will soon be provided with this amenity. The provision of this service together with an adequate and reliable water supply not only overcomes unpleasant and often disgusting nuisances which had been present for many years, but also makes new housing development possible, and encourages the rehabilitation and improvement of older properties which might otherwise become unfit for habitation.

### **Factories Act, 1961.**

No difficulties in the operation of this Act were experienced during 1964.

### **Report of Chief Public Health Inspector.**

This report by Mr. G. Rogers follows. I am grateful to Mr. G. Rogers Mr. G. M. Lawry and Mr. G. O. Cowling for the co-operation and help I have received from them at all times during the year.

#### **REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR**

##### **(a) Water Supply.**

The East Cornwall Water Board has continued as suppliers of water throughout the whole of the Rural District during 1964. During the year the Board laid mains to the villages of Golberdon and Egypt in the parish of South Hill and made a supply of water available to every householder. There now remains only one small village in the Rural District without mains supply, viz.:— Doddycross in the parish of Menheniot, and this demand is to be met in 1966.

**(1) Quality.**

As reported previously, the quality of water drawn from a public well in the village of Doddycross is not good and there is nothing practical which can be done to improve or protect it. A notice advising householders to boil water from this source has been displayed near the pump. Otherwise throughout the Rural District every village and hamlet now receives a pure supply of water. The Board takes regular samples of treated and untreated water throughout the year and not one sample of the treated water has proved unsatisfactory.

There are of course numerous private supplies in the District, that is, springs, wells, bore holes, etc; many are sampled at intervals, particularly when a new source is being brought into use for the first time. Some results are satisfactory and some not. Even those regarding which results are good cannot be relied upon to be up to standard at all times.

The following gives a list of the samples taken and the results given by the Analysts :—

**1. Linkinhorne.**

Land Spring. Direct from Spring Chamber. Lower Millcombe Farm, Linkinhorne.

Bacteriological Examination, unsatisfactory, 30/7/64.

Land Spring. Tap. Lower Millcombe Farm, Linkinhorne.

Bacteriological Examination, unsatisfactory, 10/7/64.

Land Springs. Tap. Lower Wescott, Rilla Mill, Liskeard.

Bacteriological Examination, unsatisfactory, 14/8/64.

**2. South Hill.**

Shallow Well. Tap over small reservoir. Woodcock's Well, South Hill.

Bacteriological Examination, unsatisfactory, 20/2/64.

Land Spring. Direct from Spring Chamber. Brooklands, South Hill.

Bacteriological Examination, excellent, 28/1/64.

**3. St. Martin.**

Land Spring. Reservoir. Windsworth, St. Martin.

Bacteriological Examination, excellent, 29/10/64.

**4. St. Neot.**

Shallow Well. Pump. Lewarne Lodge, Nr. Liskeard.

Bacteriological Examination, suspicious, 6/5/64.

Shallow Well. Pump. Lewarne Lodge, Nr. Liskeard.

Bacteriological Examination, suspicious, 6/5/64.

Bore direct from Bore. Whitebarrow, St. Neot.

Bacteriological Examination, unsatisfactory, 16/12/64.

Shallow Well. Direct from Well. Stuffle, St. Neot.

Bacteriological Examination, excellent, 10/6/64.

Shallow Well. Direct from Well. Menaridden Farm, St. Neot.

Bacteriological Examination, unsatisfactory, 10/6/64.

Bore direct from Bore. Carburoow, St. Neot.

Bacteriological Examination, unsatisfactory, 1/12/64.

Land Spring. Direct from Reservoir. Woodlands, St. Neot.

Bacteriological Examination, excellent, 7/2/64.

**5. St. Pinnock.**

Land Springs. Direct from Land Springs. Trago Mills, Liskeard.

Bacteriological Examination, excellent, 27/8/64.

Land Springs. Tap. East Trevillis Farm, St. Pinnock.

Bacteriological Examination, unsatisfactory, 17/9/64.

Land Springs. Direct from Reservoir. East Trevillis, St. Pinnock.

Bacteriological Examination, excellent, 13/10/64.



**6. Warleggan.**

Land Springs Tap. Higher Trevarder, Mount.

Bacteriological Examination, unsatisfactory, 21/10/64.

Land Spring. Direct from Spring Chamber. Higher Trevarder. Mount.

Bacteriological Examination, unsatisfactory, 30/9/64.

Land Springs. Direct from Spring. Higher Trevarder Farm, Mount.

Bacteriological Examination, unsatisfactory, 27/8/64.

Shallow Well. Tap over sink. Carburrow Farm, Warleggan.

Bacteriological Examination, excellent, 21/10/64.

**7. Lansallos.**

Land Springs. Direct from Spring. Polyne, Talland.

Bacteriological Examination, unsatisfactory, 17/9/64.

**8. Menheniot.**

Land Spring. Direct from Spring Chamber. Trewertha Farm, Merry-meet.

Bacteriological Examination, unsatisfactory, 16/12/64.

**9. St. Neot.**

Shallow Well. Tap. Draynes, St. Neot.

Bacteriological Examination, unsatisfactory, 10/6/64.

**(2) Quantity.**

In no instance in 1964 was there a report of any water shortage. Each year more and more houses are being connected to the mains, and existing houses are using more water because of improvements being carried out. Older houses are being provided with water closets, baths, wash-basins and sinks which causes a greater demand on the supply.

The Board proposes to construct an impounding reservoir and preliminary investigations are already in hand.

(b) As previously reported, the East Cornwall Water Board supplies every village and hamlet in the Rural District with water, with the exception of one.

At the works near St. Cleer, samples of the raw water are regularly taken throughout the year. I am informed, and have no reason to doubt, that all samples of the treated water analysed, chemically and bacteriologically, have proved entirely satisfactory.

The Board has included in the chemical examination of the water a test of Fluoride content and this is approximately 0.1 parts per million. Fluoridation of mains water in this area is not carried out.

(c) Due probably to the fact that most waters used for drinking and domestic purposes in this area are upland surface in origin, the tendency is towards plumbo solvency. Included in the treatment by the Water Board is one to neutralise the water and its action on any form of piping is very slight indeed. In any case lead is so little used to convey water that the danger of lead poisoning is negligible. No single case has been reported during the year.

(d) Regarding mains water, no action has been necessary during 1964 to deal with any form of contamination. Several samples of private sources have been examined and in most instances where contamination has been found, it has been possible to advise the owner as to methods of protection.

(e) Number of dwellings and population supplied from public mains :—  
Parishes with one or more villages having a piped supply :—

Parish	Population of Parish	Population supplied to houses	No. of houses	Population supplied by standpipes	No. of hses.
Boconnoc	156	90	30	Nil	—
Broad oak	181	100	33	Nil	—
Duloe	540	400	133	Nil	—
Lanreath	350	230	73	Nil	—
Lansallos	1407	1350	450	Nil	—
Lanteglos	1080	1200 <sup>980</sup>	400 <sup>327</sup>	Nil	—
Linkinhorne	1069	680	227	Nil	—
Liskeard	1003	580	193	Nil	—
Menheniot	1077	350	116	Nil	—
Morval	467	80	27	Nil	—
Pelynt	466	260	87	Nil	—
South Hill	367	150	50	Nil	—
St. Cleer	1496	1100	370	Nil	—
St. Ive	1180	800	270	Nil	—
St. Keyne	171	80	27	Nil	—
St. Martin	438	230	73	Nil	—
St. Neot	787	300	100	20	7
St. Pinnock	336	100	33	Nil	—
St. Veep	325	220	73	Nil	—
St. Winnow	383	80	27	Nil	—
Warleggan	151	100	33	Nil	—

### Sewerage.

The Council continued with its policy of endeavouring to provide a sewerage system and treatment works for every Village and sizeable hamlet in the district. As anticipated in the 1963 Annual Report, the scheme for the combined villages of Upton Cross and Rilla Mill was commenced during 1964 although a little later than originally thought—the starting date being 14th September, 1964. By the end of the year some 1,950 yards of sewer had been laid, and the access road to the treatment works had been constructed together with excavations for the settlement tank and rotary filter.

Preparatory work is in hand for schemes at Widegates, Trewidland, St. Keyne, Pengover and Merrymeet. Reasonable progress should ensure the commencement of all these during 1965.

In carrying out the regular maintenance of the Council's treatment works, two main problems of a general nature became apparent. The first was to be able to dry the sludge at a sufficiently rapid rate to be able efficiently to maintain de-sludging operations. The second was to regularly produce an effluent of a satisfactory Royal Commission Standard.

In order to cope with the former, it was necessary on two or three occasions to have the drying beds at some works pumped out by tanker. The latter problem is not yet solved and I am doubtful if it can be without the introduction of further treatment on the existing final effluents.

At the East Taphouse treatment works, which comprises twin septic tanks, it was decided to enter into a contract with a firm to de-sludge the tanks twice yearly. The standard of effluent from this type of works compares favourably with that derived from the primary settlement systems.

At Duloe a breakdown occurred when the centre column of the filter distributor was found to be cracked. It was replaced as soon as possible and an engineer from the suppliers visited the site to check the installation.

On two occasions during the year it was necessary to carry out repairs to sewer branches laid across the beach at Polruan.



### **Public Conveniences.**

The Council has considered it advisable to endeavour to provide public conveniences in all villages of appreciable size, and particularly those which are on main roads or frequented by holiday-makers.

During 1964, three more buildings were erected at Menheniot, Dobwalls and Lanreath. A further site was obtained in Duloe and a tender for the erection of the conveniences accepted by the end of the year. In addition, negotiations were in hand for a site in Pelynt.

It would be correct to say that not only is a lot of trouble taken to ensure suitable sites are selected, but some care is also taken to erect buildings which fit in with the surroundings. The use of local stone in part of the construction achieves this object and enhances the appearance of the toilets.

In the previous Annual Report it was mentioned that turnstiles had been removed from the Conveniences at Crumplehorn, Polperro and St. Saviour's, Polruan. In view of the considerable loss in revenue from the Polperro conveniences, the Council installed large-capacity, heavy-duty coin locks. This was done to avoid the otherwise frequent problems of coins jamming and to reduce the number of visits for emptying the coins. The locks are also fitted with a meter for recording the number of pennies.

Generally speaking all of the conveniences were reasonably well maintained during the year. As always, the chief problems arose at Polperro where, without permanent caretakers and with a very large number of visitors, it is simply impossible to keep them in the condition that one would wish, throughout the day. It was found, however, that a thorough cleansing in the early morning and two or more visits during the day, did maintain them in a reasonable state.

In the small village conveniences the selection of the right type of caretaker is of considerable importance. If he or she is interested in their appearance and condition, very few problems arise.

Only at one building, viz.: the convenience at the Quay, Polruan, did any vandalism occur. There, one W.C. pan was broken, a window pane was smashed and a length of service water pipe ripped off the wall.

### **Refuse Collection.**

The rate of private development in certain villages in the District increased considerably in 1964. Inevitably this has made increasing demands upon the refuse collection service and in an effort to meet the situation, a new vehicle was purchased. This was a Shelvoke and Drewry Pakamatic—which compresses an equivalent 20 cubic yard load down to a much smaller bulk. In order to make the best use of this vehicle it was necessary to re-route certain collection rounds, but there is no doubt that it was a considerable improvement on the old type of vehicle, and has saved many return trips to the dumps for emptying during the course of a week. Unfortunately, the vehicle was not received until late September and could not be used during the peak holiday period.

The problem of scattered premises, far away from regular routes, still exists and, regrettably, some of these can only be collected as infrequently as once monthly. These are kept to an absolute minimum and the householders concerned appreciate the difficulties involved and are, with very few exceptions, well satisfied with the service.

The Council considered the implementation of the Paper Sack System, but finally decided, that in view of the very considerable cost involved, not to adopt it. It was estimated that the sack holders would cost £9,625, and that the annual charge for the sacks would be £4,963.

During the year there were two or three occasions when unofficial dumps were located and these were remedied either by clearance or, where suitable, by being adequately covered with soil.

It was not found necessary to find other sites for the disposal of the refuse, but the three tips in use, i.e., quarries at St. Cleer and Bury Down, and low-lying ground at Polperro, becoming more full, need more frequent attention from bulldozers.

The surfaces of the tips must be kept well covered to prevent paper blowing about and causing unsightly nuisances.

### **Litter.**

The Council's policy of preventing the spoilation of beauty spots and highway verges by litter has been continued throughout 1964. More and larger litter baskets have been acquired and placed on sites known to be frequented by summer visitors. The County Highways Department has also assisted, particularly by placing metal drums in lay-bys on first and second class roads.

One problem experienced in Polperro was created by seagulls discovering that fish and chip containers placed in litter baskets sometimes contained food scraps. During early mornings the birds would descend on the baskets and remove almost all the litter which was scattered over the streets nearby. The solution to this was the provision of standard steel dust bins with close-fitting covers. It prevented the seagulls gaining access but made it rather more difficult for persons to deposit litter. This often results in more litter on the streets.

Litter in the form of disused motor cars has not increased in this District during 1964. Only very few car bodies dumped in isolated places are known and this is no doubt due to the fact that there are several Scrap Metal dealers and car breakers in the area who are willing to take such scrap and dispose of it.

### **Camping and Moveable Dwellings.**

The summer of 1964 was an average one and was very much better than that of 1963. For this reason a great number of people came into Cornwall with tents or caravans. During the early part of August all licensed sites were full to overflowing and many visitors, not being able to find accommodation, used land not licensed for camping.

There is a marked decrease in the number of towing caravans being used by holidaymakers, and the dormobile has become a much more attractive proposition. Without doubt however, the tent is increasing in popularity and with the ease with which a modern tent can be erected, coupled with the large sizes which are now available, the family man with a car is finding it a very economical way of spending a holiday. For the Public Health Inspector the control of the tent site is fraught with frustration. With the powers of the Public Health Act, 1936, made in an era when few people had cars or holidays, as his only weapon, he can do little to achieve the standards which are expected today. The forty-two day exemption rule enables any farmer to open a tent site during the peak season without any licence. It is surely not too much to expect Parliament to give the same control over tents as there is over caravans.

The operation of the Caravan Act, 1960, has resulted in considerable improvement in the Caravan Sites in the District. In one large site an additional toilet block was erected comprising of the following :—

MEN	WOMEN
11 wash hand-basins.	9 wash hand-basins.
5 water closets.	9 water closets.
2 showers.	2 showers.
9 urinals.	

On another site a new toilet block comprising 8 water closets for females and 6 water closets and 7 urinals for men was brought into use.

During the year the Council granted 9 site licences in respect of individual caravans. In addition, licences were granted for the 5 new sites comprising a total of 116 seasonal caravans. Each licence was granted subject to conditions and carrying out works within a prescribed period.



A licence was granted to the Camping Club of Great Britain and Ireland to station 75 tents. The use of this land will be restricted to members of the Club.

With the camping sites, facilities such as shops, clubs, restaurants and swimming pools are being provided. The amount of Public Health work which Caravan and Camping Sites bring, increases each year.

### **Rodent Control.**

The Council has continued to provide a Rodent Control Service throughout the District. One man is partly engaged on rodent operator's work.

Constant control is kept on the reservoirs of infestation such as the three refuse tips, the sewerage and sewage disposal systems, and rivers. During the year under review, 704 visits were made to various types of premises and 71 visits were made to agricultural premises. The Council provides a treatment service for farms and business premises, for which a charge is made. Private dwellings are treated free. Over the years there has been a considerable decrease in the rat population in the district. A large number of occupiers of premises, including farmers, carry out their own treatment by using 'Warfarin' poison.

### **FOOD.**

#### **(1) Meat Inspection.**

**Slaughter Houses.** The meat consumed in the Liskeard Rural District is obtained from the Abattoir of the Fat Stock Marketing Corporation which is situated within the Borough of Liskeard. Meat inspection there is carried out by the officers of the latter authority.

Inspection of the twelve butchers' shops are made from time to time and compliance with the requirements of The Food Hygiene Regulations is strictly enforced.

One Slaughterman's Licence was issued in 1964 to a person who operates outside the Rural District.

#### **(2) Food Hygiene Regulations, 1960.**

The task of maintaining reasonable standards in the various food premises is never ending. Routine inspections seldom show immediate results but the long term effect of this work does produce a considerably greater awareness of the importance of food hygiene practices by staff and management alike.

The standard of hygiene in the village shop has improved considerably over the years. In all cases there is now a supply of hot and cold water available, together with sinks and wash hand-basins. Very little food is sold which is not either pre-packed or canned and the shop-keeper is now realising the value of the refrigerated display cabinet.

The number of travelling shops which are in use in the District is on the increase and one would certainly like to have improved powers of control over them.

During the year under review, sinks with hot and cold water supplies laid on were provided in 4 grocers' shops and in 1 greengrocer's shop.

A new snack bar and crab preparation room was brought into use in 1964. The construction and provision of facilities were strictly in accordance with the Food Hygiene Regulations.

The number and types of food premises in the Rural District are as follows :—

Butchers' Shops	...	...	...	10
Grocers' Shops	...	...	...	63
Cafes and Restaurant Kitchens	...	...	...	29
Hotel and Guest House Kitchens	...	...	...	21
Licensed Premises	...	...	...	25
Greengrocers' Shops	...	...	...	2
Bakehouses	...	...	...	2
Fish Shops	...	...	...	1

**(3) Examination of Food.**

Inspection of food exposed for sale is made during routine visits to the various food premises. During the year under review 417lbs. of canned meats were condemned as unfit for human consumption.

**(4) Licensed Premises.**

There are 25 licensed premises in the Rural District. Periodic inspections are made of these premises and generally conditions are now very satisfactory.

**(5) Milk and Dairies Regulations, 1959.**

There are five registered dairies in the Rural District. At present no milk is bottled on any of the registered premises.

One Dairy is in use for the preparation of cream which is received in bulk and pasteurised on the premises. During the year 4 samples of the product were taken and these were satisfactory. Regular monthly samples will be taken in the future. Certain improvements were effected to the premises during the year.

**(6) Food and Drugs Act, 1955.**

Eight new premises were registered during the year for the sale of Ice Cream, bringing the total number now on the register to 115. There is a growing tendency to sell loose Ice Cream rather than the pre-packed product. This, of course, renders the Ice Cream liable to contamination whilst serving.

During the summer of 1964, 30 samples of Ice Cream were taken and tested, and of these 25 were placed in Grade 1 and 5 in Grade 2, which are very good results indeed.

Two butchers' shops were registered during the year for the manufacture of sausages.

The sampling of milk supplies for Brucella Abortis is being carried out throughout the county by the Cornwall County Council. No samples for this purpose have therefore been taken by the District Council.

There are no egg pasteurisation plants in the District.

**Disease of Animals (Waste Foods) Order, 1957.**

There are 6 licensed premises carrying out boiling of waste foods. Routine inspections have been carried out in each case.

**Animal Boarding Establishments Act, 1963.**

During the year one licence was granted to keep an Animal Boarding Establishment.

**Offices, Shops and Railway Premises Act, 1963.**

During 1964 applications were received for the registration of 82 premises under the above Act. Fifty-one visits were made to various premises to ascertain whether registration was required and a general inspection was made of 15 registered premises.

**Re-conditioning and Modernisation of Existing Houses.**

The provision of sewers in many of the villages in the Rural District has made it possible to give approval to more schemes of re-conditioning both under the Standard and Discretionary Grant Schemes. It will be seen that no application for either scheme was refused by the Council. This was because each scheme is examined informally before an application is submitted.



**DISCRETIONARY GRANTS.**

No. of applications received (dwellings)	39
No. of applications approved (dwellings)	39
Total amount paid in grants	£9,906
No. of dwellings actually improved :—	
(a) Owner/occupier	11
(b) Tenanted	16

**STANDARD GRANTS.**

No. of applications received (dwellings)	26
No. of applications approved (dwellings)	26
Total amount paid in grants	£5,103
Average grant per house	£121-10-0d.
No. of dwellings actually improved :—	
(a) Owner/occupier	26
(b) Tenanted	21

The number of schemes approved, both discretionary and standard, was three less than in 1963, but the total amount paid as grants increased from £11,100 to £15,009.

There is no doubt whatever that the schemes for improving dwellings in the Liskeard Rural District has been most successful, resulting in a great number being provided with all modern amenities to which every householder should be entitled.

**Slum Clearance.**

The following report shows the action taken by the Council during 1964 as regards Slum Clearance and the repair of dwellings.

Total number of houses repaired in consequence of informal action (all Acts) 117.

Sections 9, 10 and 16, Housing Act, 1957.

Number of Notices served (a) Informal 97  
(b) Formal 6

Number of houses made fit after service of formal notices  
(a) By owner 6  
(b) By local authority—nil

**Public Health Acts.**

Number of Notices served — (a) Informal 20  
(b) Formal—nil

**Housing Act, 1957.**

Number of Undertakings accepted (section 16)	4
Number of Closing Orders made (section 17)	nil
Number of Demolition Orders made (section 17)	nil
Number of houses demolished by informal action	3
Number of Closing Orders (section 18)	nil
Number of Closing Orders determined (section 18)	nil

There are no Common Lodging Houses in this District.

It was obviously a wise decision by the Council to accept undertakings in respect of several cottages, dealt with under the Slum Clearance scheme, particularly those in villages in the southern part of the area. There, the demand for Country Cottages has become so great that new owners are willing to spend large sums, usually uneconomic, in order to improve and repair them.

**Building Control.**

The amount of time which has to be spent on the examination of plans and building inspection has increased considerably over the last few years. During the year under review, 360 plans were submitted for approval under building bye-laws. Sixty-five new private dwellings were completed.

**Council Housing.**

The Council continued with its policy of building new dwellings where there was a need and during 1964 the following were completed and occupied :—

- 4 2-bedroomed flats.
- 2 2-bedroomed bungalows.
- 4 1-bedroomed flats.
- 4 1-bedroomed bungalows.

In addition 28 existing dwellings were provided with all modern amenities.



## APPENDIX 1.

## PRINCIPAL CAUSES OF DEATH—ALL AGES—1964

Disease	St. Germans	Liskeard	Saltash	Torpoint	Liskeard	Looe	Health
	R.D.	R.D.	M.B.	U.D.	M.B.	U.D.	Area No. 7
Heart disease	70	89	36	17	31	28	271
Stroke	31	26	20	12	27	4	120
Cancer (all sites)	31	24	24	13	10	9	111
Respiratory disease	19	10	7	6	4	2	48
Circulatory disease	8	6	3	7	2	2	28
Accidents	4	4	4	1	1	2	*16
Digestive disease	4	2	2	1	—	2	11
Suicide	2	4	1	1	—	—	8

\* Includes 5 motor vehicle accidents.

## APPENDIX 2.

TYPES OF HEART DISEASE AND CANCER CAUSING DEATH  
1964.

Type of Disease	St. Germans	Liskeard	Saltash	Torpoint	Liskeard	Looe	Health
	R.D.	R.D.	M.B.	U.D.	M.B.	U.D.	Area No. 7
Coronary disease, angina	37	33	18	13	9	13	123
Hypertension with heart disease	5	4	2	1	3	2	17
Other heart disease	28	52	16	3	19	13	131
Cancer of lung and bronchus	3	3	5	3	1	1	16
Cancer of stomach	6	3	3	3	—	—	15
Leukaemia	1	—	1	2	2	1	7
Cancer of breast	4	—	1	—	1	—	6
Cancer of uterus	—	1	2	—	2	—	5
Other Cancers	17	17	12	5	4	7	62

## APPENDIX 3.

## DEATHS BY AGE GROUP—1964

Districts	0-4 years	5-14 years	15-44 years	45-64 years	65-74 years	75 years & over	All ages
St. Germans R.D.	2	—	7	34	52	90	185
Liskeard R.D.	9	1	7	37	54	78	186
Saltash M.B.	6	—	1	23	27	51	108
Torpoint U.D.	1	—	2	11	24	25	63
Liskeard M.B.	1	—	1	9	20	48	79
Looe U.D.	—	—	2	8	8	35	53
Health Area No. 7	19	1	20	122	185	327	674

**APPENDIX 4.**

**TUBERCULOSIS**  
**NEW CASES AND DEATHS IN HEALTH AREA No. 7—1964.**

Age group	New cases		Deaths	
	M	F	M	F
0—4 years	—	—	—	—
5—14 years	2	—	—	—
15—24 years	1	—	—	—
25—44 years	1	2	—	1
45—64 years	8	1	1	—
65 years and over	1	3	—	1
	13	6	1	2

	Males	Females	Total
New case rate per 1,000 of population	0.25	0.12	0.37
Mortality rate per 1,000 of population	0.02	0.04	0.06

**CASE RATES AND MORTALITY RATES PER 1,000 OF POPULATION IN THE SIX COUNTY DISTRICTS IN HEALTH AREA No. 7 1964.**

District	New Cases	All known Cases	Deaths
		at 31-12-64	
St. Germans R.D.	0.21	3.31	0.21
Liskeard R.D.	0.30	3.20	—
Saltash M.B.	0.13	3.37	—
Torpoint U.D.	0.15	4.02	—
Liskeard M.B.	0.66	7.06	—
Looe U.D.	1.78	5.58	—
Health Area No. 7	0.37	3.90	0.06
Cornwall County	0.33	5.51	0.06

**APPENDIX 5.**

**CANCER OF THE LUNG AND BRONCHUS**  
**DEATHS BY AGE GROUP—1964.**

Age group	Males	Females
45—54 years	1	—
55—64 years	6	1
65—74 years	5	1
75 years and over	1	—
Plus 1 female in 35—45 year group.		

**DEATH RATE PER 1,000 OF POPULATION—1964**

Health Area No. 7	0.275	0.039	0.314
Cornwall County	0.316	0.072	0.388
England and Wales	0.453	0.082	0.535



**APPENDIX 6.****FACTORIES ACT, 1961.**

This table is enclosed by a request of the Minister of Labour to indicate to Medical Officers of Health the prescribed particulars which are required by Section 153(1) of the Factories Act, 1961, to be furnished in their Annual Reports with respect to matters under Parts I and VIII of that Act which are administered by the District Council. This table, which is not intended to supersede the fuller statement which is desirable in the text of the Report, should be attached as an annex to the Report.

**Annual Report of the Medical Officer of Health  
in respect of the Year 1964 for the Rural District of Liskeard  
in the County of Cornwall.**

**Prescribed Particulars on the Administration of the Factories Act, 1961.****PART 1 OF THE ACT.****1—INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors.)**

Premises	No. on Register	Number of		
		Inspections	Written notices	Occu- piers prose- cuted
(1)	(2)	(3)	(4)	(5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities†	25	28	Nil	Nil
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	61	40	Nil	Nil
(iii) Other Premises in which Section 7 is enforced by the Local Authority** (excluding out-workers' premises.)	59	70	Nil	Nil
Total	145	138	Nil	Nil

**2—Cases in which DEFECTS were found.**

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases.")

Particulars	Number of cases in which defects were found		Number of cases in which prosecutions were instituted		
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1.)	3	3	—	—	—
Overcrowding (S.2.)	—	—	—	—	—
Unreasonable temperature (S.3.)	—	—	—	—	—
Inadequate ventilation (S.4.)	—	—	—	—	—
Ineffective drainage of floors (S.6.)	—	—	—	—	—
Sanitary Conveniences (S.7.)					
(a) Insufficient	3	3	—	—	—
(b) Unsuitable or defective	1	1	—	—	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to Out-work)	—	—	—	—	—
Total	7	7	—	—	—

† To prevent any differences between the lists kept respectively by the Local Authorities and H.M. Inspectors of Factories of the numbers of factories in which sections 1, 2, 3, 4 and 6 of the Factories Act, 1961 are enforced by Local Authorities, it is requested that Local Authorities should compare their lists of factories with the lists kept by H.M. Inspectors of Factories.

\*\* i.e. Electrical Stations (Section 123(1)), Institutions (Section 124), sites of Building Operations and Works of Engineering Construction (Section 127), Slaughterhouses (Section 175 (1) (d) and (e)) and Railway Running Sheds (Section 175(2) and (10)).

### **PART VIII OF THE ACT.**

#### **Outwork (Sections 133 and 134).**

Nature of work	No. of out-workers in August list required by section 133(1) (c)	No. of cases default in sending lists the Council	No. of prosecu- tions for failure to supply lists	No. of instances of work in unwhole- some premises	Notices served	Prose- cutions
1	2	3	4	5	6	7
Wearing apparel Making, etc., Cleaning and Washing	2	—	—	—	—	—





